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FACSIMILE COVER LETTER

To: Commissioner for Patents
Examiner Chowdhury, Nigar

Firm: U.S. Patent and Trademark Office
Art Unit 2621

Facsimile: (571) 273-8300

From: William S. Frommer

Date: November 27, 2006

Re: FLH Ref No.: 450100-03342
Serial No: 09/904,319

Number of Pages: 18
(including cover page)

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00346950

PATENT
450100-03342IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Jun Watanabe, et al.
 Serial No. : 09/904,319
 Filed : July 12, 2001
 for : RECORDING AND REPRODUCING APPARATUS AND METHOD
 Examiner : Chowdhury, Nigar
 Art Unit : 2621

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745 Fifth Avenue
New York, NY 10151
Tel: 212-588-0800

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.
 The fee has been calculated as shown below.
 This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	16	Minus	** = 20	* 0 x	\$50 (25)	= \$0
Independent claims	12	Minus	** = 12	* 0 x	\$200 (100)	= \$0
Total additional fee for this amendment						\$0

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the highest number of total claims previously paid for is less than 20, write "20" in this space.
- *** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.
- This application contains a multiple dependent claim. The required fee of \$300 (150) has been previously paid or is paid herewith .
- This response is being filed within the ____ month following the expiration of the term originally set therefor. This is a petition to request a ____ month extension of time. A check covering the cost of the petition is enclosed.
- A check in the amount of \$____ is attached, which covers the cost of additional claims petition for extension of time.
- Charge \$____ to Deposit Account No. 50-0320.
- Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

CERTIFICATE OF FACSIMILE

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Bamer Shindman
(Name of person signing transmittal)


Signature

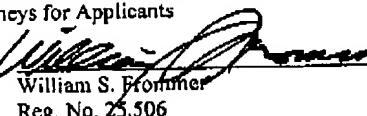
November 27, 2006

Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
Attorneys for Applicants

By:


William S. Frommer
Reg. No. 25,506

U.S. Patent Application No. 09/904,319
Reply to Office Action dated August 25, 2006

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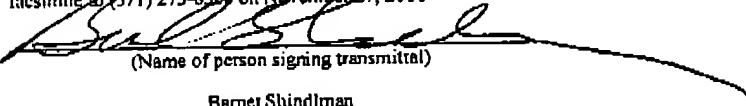
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METHOD
Filed : July 12, 2001
Examiner : Chowdhury, Nigar
Art Unit : 2621
Confirmation No. : 1815

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(Name of person signing transmittal)

Barnet Shindman

Signature

November 27, 2006

Date of Signature

RESPONSE UNDER 37 C.F.R. § 1.121

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Non-Office Action mailed on August 25, 2006, having a three-month statutory period for response set to expire on November 27, 2006 (November 25, 2006 being a Saturday), please amend the above-captioned application as follows.

U.S. Patent Application No. 09/904,319
Reply to Office Action dated August 25, 2006

PATENT
450100-03342

Amendments to the Claims are reflected in the listing of claims, which begins
on page 3 of this paper.

Remarks/Arguments begin on page 14 of this paper.